PTO/SB/17 (12-04v2) Approved for use through 07/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

rk Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number WA RADEN Effective on 12/08/2004. Complete if Known ees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/632,232 Filing Date July 31, 2003 For FY 2005 First Named Inventor John E. Schreiber Examiner Name William C. Doerrler Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3744 TOTAL AMOUNT OF PAYMENT 0.00Attorney Docket No. Serie 6041 METHOD OF PAYMENT (check all that apply) Credit Card Money Order None Other (please identify): 01 - 1375American Air Liquide, Inc. Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity** Fee (\$) Application Type Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee Description <u>Fee (\$)</u> Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee Paid (\$) **Multiple Dependent Claims** Fee (\$) 44 ō - 44 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. 0 0 Indep. Claims Extra Claims Fee Paid (\$) Fee (\$) - 4 or HP = 0 0 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) - 100 = (round up to a whole number) x 0 Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) \$0.00 Other (e.g., late filing surcharge) SUBMITTED BY Registration No. Telephone 713-624-8956 Signature 55,254 -(Attorney/Agent) Name (Print/Type) Date February 7, 2005 Elwood L. Havnes

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.